

Exhibit N

bcc: B. Stevenson-1410
P. L. Slayton-1650
C. Paton
D. Wood
C. Field-B2NE
T.L. Gossage
C. Jordan-B2NE
Redbook

May 30, 1975

Mr. Duane M. Blough
Cornell Dubilier
1605 Rodney French Blvd.
New Bedford, Mass. 02741

Dear Mr. Bloughs:

**Special Undertaking by Purchasers of
Polychlorinated Biphenyls (PCBs)**

You will recall that our ability to supply polychlorinated biphenyls to your company and/or subsidiaries under the Special Undertaking was contingent on your having specific product liability insurance coverage.

According to our records, you have two insurance certificates on file with our Company, Kemper NBR 28X010020, and CNA NBR RDX8936473 which will expire on July 1, 1975. In order for us to continue shipment of PCB dielectric fluids, it will be necessary for us to receive a renewal certificate for both of these policies prior to the above date.

We would also like to remind you that the insurance we require in support of your Special Undertaking is \$10,000,000 if your annual purchases are 200,000 pounds or over, and \$5,000,000 if your annual purchases are under 200,000 pounds.

Please send the insurance certificates addressed to my attention.

Very truly yours,

H. S. Bergen 0527047
Director
Specialty Products

/deb

B.P.S. to C. Field: This reminder is for company's excess insurance coverage. No shipments will be made to customer after July 1, 1975 until you are notified of certificates received.

bcc: M. A. Petrilii
E. Potter - B2NK
D. Wood
C. Paton
G. Swallow - B2NG
•Carol Jordan
Redbook

MONSANTO INDUSTRIAL CHEMICALS CO.
800 N. Lindbergh Boulevard
St. Louis, Missouri 63166
Phone: (314) 694-1000

February 27, 1976

Mr. Duane M. Blough
Cornell Dubilier
1605 Rodney French Blvd.
New Bedford, Massachusetts 02741

Dear Mr. Blough:

Special Undertaking by Purchasers
of Polychlorinated Biphenyls (PCBs)

You will recall that our ability to supply polychlorinated biphenyls to your company and/or subsidiaries under the Special Undertaking was contingent on your having specific product liability insurance coverage.

According to our records the insurance certificate on file with our Company will expire on April 1, 1976. In order for us to continue shipment of PCB dielectric fluids, it will be necessary for us to receive a renewal certificate prior to the above date. In order for this certificate to be acceptable, it must contain the clause stating "Includes blanket contractual liability and pollution coverage in case of sudden and accidental spill."

We would also like to remind you that the insurance we require in support of your Special Undertaking is \$10,000,000 if your annual purchases are 200,000 pounds or over, and \$5,000,000 if your annual purchases are under 200,000 pounds.

Please send the insurance certificate addressed to my attention.

Very truly yours,

R. G. Potter
Business Director
Functional Products

dw

0564929

~~REBS: NO SHIPMENTS WILL BE MADE TO THIS COMPANY AFTER APRIL 1, 1976.~~

C. Jordan
B2NG

0564930

TO: W. Maddox - No shipments shall be made to this customer after 4/1/77.

bcc: H. N. Brandstetter
M. C. Jordan
J. A. Alley
C. Paton
D. Wood/Redbook
E. M. Potter

Monsanto

SPECIALTY CHEMICALS DIVISION

MONSANTO INDUSTRIAL CHEMICALS CO.
800 N. Lindbergh Boulevard
St. Louis, Missouri 63166
Phone: (314) 694-1000

March 8, 1977

Mr. Phillip Murray, General Manager
Cornell Dubilier Electronics
1605 E. Rodney French Blvd.
New Bedford, Mass. 02744

Dear Mr. Murray:

Re: Special Undertaking By Purchasers of
Polychlorinated Biphenyls (PCB's)

You will recall that our ability to supply polychlorinated biphenyls to your company and/or subsidiaries under the Special Undertaking was contingent on your having specified product liability insurance coverage.

According to our records, the insurance certificate on file with our Company will expire on April 1, 1977. In order for us to continue shipment of PCB dielectric fluids, it will be necessary for us to receive a renewal certificate prior to the above date.

We would also like to remind you that the insurance we require in support of your Special Undertaking is \$10,000,000 if your annual purchases are 200,000 pounds or over and \$5,000,000 if your annual purchases are under 200,000 pounds. All insurance certificates must contain the clause, Includes blanket contractual liability and pollution coverage in case of sudden and accidental spill."

Please send the insurance certificate addressed to my attention.

Sincerely,

D. Wood
Market Manager
Dielectrics

tmc

0526996

MEMORANDUM OF INSURANCE

The HOME Insurance Company
New York, N.Y.



This is to certify that the following described insurance is in force at this date.

NAME OF INSURED

FEDERAL PACIFIC ELECTRIC COMPANY, CORNELL DUBLIER AND F.P.E. - PIONEER ELECTRIC LTD.

ADDRESS OF INSURED

150 AVENUE "L", NEWARK, NEW JERSEY 07101

POLICY NUMBER HEC 9794317	CERTIFICATE NO.	POLICY PERIOD FROM 7/1/71	TO 7/1/72
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DESCRIPTION OF COVERAGE**LIMITS**

Excess Personal Injuries and Property Damage Liability Insurance - to indemnify the Insured for all sums which the Insured shall be obligated to pay by reason of the Liability imposed upon the Insured by law or assumed by the Insured under contract or agreement, for damages, direct or consequential, and expenses, on account of Personal Injuries, including death at any time resulting therefrom, and Property Damage, caused by or arising out of each occurrence and sudden and accidental pollution happening during the policy period.

\$10,000,000 each and every occurrence combined for Personal Injuries and Property Damage Liability in excess of underlying insurance.

*OK W.W.
4/19/72*

This document is furnished to you as a matter of information only. The issuance of this document does not make the person or organization to whom it is issued an additional insured, nor does it modify in any manner the contracts of insurance between the Insured and the Company. Any amendment, change or extension of such contracts can only be effected by specific endorsement attached thereto.

Should the above mentioned contracts of insurance be cancelled, assigned or changed during the above named policy period in such manner as to affect this document, we, the undersigned, will endeavor to give notice to the holder of this document, but failure to give such notice shall impose no obligation of any kind upon the undersigned or upon the Company.

ISSUED TO

MONSANTO CHEMICAL COMPANY

0526390

ADDRESS

800 NORTH LINDBERG BLVD, ST. LOUIS, MISSOURI

DATED: April 21, 1972

THE HOME INSURANCE COMPANY

BY: *John A. Masterson*

RECEIVED
APR 20 1972
INSURANCE SECTION

0526391

CERTIFICATE OF INSURANCE



Co. Code 1 Hartford Fire Insurance Company
 2 Hartford Accident and Indemnity Company
 3 Citizens Insurance Company of New Jersey
 4 New York Underwriters Insurance Company
 5 Twin City Fire Insurance Company

This is to certify that the company designated herein by Co. Code has issued to the named insured the policies enumerated below.

Co. Code
5

Named Insured and Address

FEDERAL PACIFIC ELECTRIC COMPANY
AND CORNELL DUBILIER ELECTRONICS
150 AVENUE L
NEWARK, NEW JERSEY

The policies indicated herein apply with respect to the hazards and for the coverages and limits of liability indicated by specific entry herein but this certificate of Insurance does not amend, extend or otherwise alter the terms and conditions of the insurance coverage in the policies identified herein.

Hazards	Policy Number and Policy Term	Covrances and Limits of Liability					
		(SINGLE LIMIT)		(DUAL LIMITS)			
		Bodily Injury and Property Damage Liability		Bodily Injury Liability		Property Damage Liability	
		*each occurrence	aggregate	each person	*each occurrence	*each occurrence	aggregate
General Liability Premises-Operations		\$,000	\$,000	\$,000	\$,000	\$,000	\$,000
Independent Contractors		\$,000	\$,000	\$,000	\$,000	\$,000	\$,000
Completed Operations; Products		\$,000	\$,000	\$,000	\$,000	\$,000	\$,000
Contractual (as described below)		\$,000	\$,000	\$,000	\$,000	\$,000	\$,000
Automobile Liability							
Owned Automobiles		\$,000	XXXX	\$,000	\$,000	\$,000	XXXX
Hired Automobiles		\$,000	XXXX	\$,000	\$,000	\$,000	XXXX
Non-Owned Automobiles		\$,000	XXXX	\$,000	\$,000	\$,000	XXXX
Workmen's Compensation and Employers' Liability				Compensation — Statutory			
Umbrella Liability	10HUA46300 7-1-72-75			Employers' Liability — \$,000			
				\$ 1,000,000			

*If with respect to Automobile Liability the Policy Number entered above includes the symbol GB, AZ, MVP, MAG or PGB, the word "occurrence" is amended to read "accident".

Location and description of operations, automobiles, contracts, etc. (For contracts, indicate type of agreement, party and date.)

0526382

(Cancelled) Effective 4-11-75

If policy is canceled, 10 DAYS written notice will be given to:

MONSANTO INDUSTRIAL CHEMICAL COMPANY
800 NORTH LINDBERG BLVD.
ST. LOUIS, MISSOURI 63116

Date

By.....

H. Olson

Authorized Representative

CERTIFICATE OF INSURANCE
LEXINGTON INSURANCE COMPANY

25 New Chardon Street • Boston, Massachusetts 02114
 A CAPITAL STOCK COMPANY

This is to certify that the insurance policy specified below has been issued to the insured named herein and that, subject to their provisions, exclusions and conditions, such policies afford the coverages indicated insofar as such coverages apply to the occupation or business of the Named Insured as stated:

Cornell-Dubilier Electric Corporation

INSURED: (Federal Pacific Electric Company)

c/o UV Industries, Inc.

ADDRESS: 437 Madison Ave., New York, N. Y. 10022

BUSINESS: Electrical Equipment Manufacturer

COVERAGE: Umbrella Liability

Policy Number	Effective Date	Expiration Date	Limit of Liability
500-28-16	April 23, 1975	April 1, 1976	\$1,000,000

EXCESS OF

Coverage	Underlying Limits
A. Bodily Injury Automobile	\$ 500,000 Each Person \$ Each Accident or Occurrence
B. Bodily Injury Except Automobile	\$ 500,000 Each Person \$ 500,000 Each Accident or Occurrence Aggregate Products
C. Property Damage Automobile	\$ 250,000 Each Accident or Occurrence
D. Property Damage Except Automobile	\$ 250,000 Each Accident or Occurrence \$ 500,000 Aggregate Operations \$ Aggregate Protective \$ Aggregate Products \$ 500,000 Aggregate Contractual
E. Combined Single Limit Bodily Injury and/or Property Damage	\$ Each Accident or Occurrence
F. Employers Liability, Coverage "B"	\$ 100,000 Statutory

OR Includes Pollution on a Sudden and
 EXCESS OF Accidental Basis

\$ 10,000 ultimate net loss in respect of each occurrence not covered by underlying but applicable to umbrella liability only.

This Certificate of Insurance is issued as a matter of information only to:

NAME: Monsanto Company

ADDRESS: 800 North Lindbergh

St. Louis, Mo.

Dated at
 this 27 Day of May 1975

A. Roy Barnes
 Authorized Signature

Certificate of Insurance

LUMBERMENS MUTUAL CASUALTY COMPANY AMERICAN MOTORISTS INSURANCE COMPANY AMERICAN MANUFACTURERS MUTUAL INSURANCE COMPANY FEDERAL KEMPER INSURANCE COMPANY SEQUOIA INSURANCE COMPANY

THIS CERTIFICATE IS ISSUED AT THE REQUEST OF:

Mansanto Company
800 North Lindbergh
St. Louis, Missouri 63166

DATE ISSUED: May 30th, 1975

THE POLICIES INDICATED BELOW BY POLICY NUMBER, POLICY PERIOD AND LIMITS OF LIABILITY HAVE BEEN ISSUED TO:

INSURED'S NAME AND ADDRESS		Cornell-Dubilier Electric Corp. 437 Madison Avenue New York, New York 10022		
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POLICY FORM	POLICY NUMBER	POLICY PERIOD (MO.-DAY-YEAR)	COVERAGES AND LIMITS OF LIABILITY	
Workmen's Compensation and Employers' Liability		From _____ To _____	Workmen's Compensation—Workmen's Compensation Law of Employers' Liability—\$	
Combination Automobile—General Liability	5ZM 578 702	From 4/1/75 To until canc.	For such Coverage Parts as are indicated below by "x" and for the Limits of Liability stated opposite thereto.	
COVERAGE AFFORDED				
<input type="checkbox"/> Comprehensive Automobile Liability Insurance			each person	each occurrence
<input type="checkbox"/> Garage Insurance <input type="checkbox"/> Hazard 1 <input type="checkbox"/> Hazard 2		\$ _____	\$ _____	aggregate
<input type="checkbox"/> Garagekeepers' Legal Liability		\$ _____	\$ _____	\$ _____
<input checked="" type="checkbox"/> Comprehensive General Liability Insurance*			\$500,000	\$500,000
<input checked="" type="checkbox"/> Owners', Landlords' and Tenants' Liability Insurance			\$ _____	\$200,000
<input type="checkbox"/> Manufacturers' and Contractors' Liability Insurance			\$ _____	\$ _____
<input type="checkbox"/> Completed Operations and Products Liability Insurance			\$ _____	\$ _____
<input type="checkbox"/> Contractual Liability Insurance (Designated Contracts Only)			\$ _____	\$ _____
<input type="checkbox"/> Independent Contractors Liability Insurance			\$ _____	\$ _____
<input checked="" type="checkbox"/> Other Coverage Parts: Employee Benefit Liability			\$250,000	500,000
2SX 010 020			each claim aggregate	\$ _____
			\$4,000,000	Excess of \$1,000,000

DESCRIPTION OF OPERATIONS AND LOCATION TO WHICH CERTIFICATE APPLIES

All operations undertaken by the Insured.

SPECIAL PROVISIONS

In the event of any cancellation or material change in said policy the company will notify the party to whom this certificate is addressed ten (10) days prior to such change or cancellation.

This certificate of insurance neither affirmatively nor negatively amends, extends or alters the coverage afforded by the above numbered policy. *Comprehensive General Liability Insurance applies to the following hazards: Owners', Landlords' and Tenants' and Manufacturers' and Contractors; Independent Contractors; and Products, Completed Operations, except as noted above.

New York, New York

Issued at _____

C. H. Teves

AUTHORIZED REPRESENTATIVE

0526358





CERTIFICATE OF INSURANCE

The Policy identified below by a policy number is in force on the date of Certificate Issuance. Insurance is afforded only with respect to those coverages for which a specific limit of liability has been entered and is subject to all the terms of the Policy having reference thereto including for Umbrella Excess Third Party Liability Insurance a provision requiring the maintenance of underlying insurance or self insurance. This Certificate of Insurance neither affirmatively nor negatively amends, extends or alters the coverage afforded under any policy identified herein.

In the event of cancellation of the Policy the Company issuing said Policy will make all reasonable effort to send notice of cancellation to the Certificate Holder at the address shown herein, but the Company assumes no responsibility for any mistake or for failure to give such notice.

NAME AND ADDRESS OF INSURED

Federal Pacific Electric Company
150 Avenue L
Newark, New Jersey 07101

NAME AND ADDRESS OF CERTIFICATE HOLDER

Monsanto Company
800 North Lindbergh
St. Louis, Missouri 63166

DATE OF CERTIFICATE ISSUANCE:

Dan Mitchell
Authorized Representative

3rd EXCESS
(EXPIRED)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERNS NO RIGHTS UPON THE HOLDER

TYPE OF INSURANCE IS DESIGNATED BELOW	COVERAGES	LIMITS OF LIABILITY		
		EACH PERSON	EACH OCCURRENCE	AGGREGATE
I. <input type="checkbox"/> Comprehensive Automobile Liability	Bodily Injury Liability	\$	\$	
<input type="checkbox"/> Schedule Automobile Liability	Property Damage Liability	\$	\$	
	Bodily Injury and Property Damage Liability Combined		\$	
<input type="checkbox"/> Protection Against Uninsured Motorists	Uninsured Motorists	\$	\$	†
<input checked="" type="checkbox"/> Comprehensive General Liability	Bodily Injury Liability	\$	\$	\$
<input type="checkbox"/> Owners', Landlords' and Tenants' Liability	Property Damage Liability	\$	\$	\$
<input type="checkbox"/>				
<input type="checkbox"/> Manufacturers' and Contractors' Liability	Bodily Injury and Property Damage Liability Combined		\$	\$
<input type="checkbox"/> Owner's and Contractor's Protective Liability				
<input type="checkbox"/> Beauticians' Malpractice Liability	Bodily Injury Liability	\$	\$	\$
	Property Damage Liability		\$	\$
III. <input checked="" type="checkbox"/> EXCESS THIRD PARTY LIABILITY	Combined Bodily Injury & Property Damage Liability		5 Million excess 5 Million	5 Million excess 5 Million
IV. <input type="checkbox"/> Workmen's Compensation Employers' Liability	A. Statutory	Statutory	Locations:	
<input type="checkbox"/> Bodily Injury	\$	†		
V. <input type="checkbox"/> Umbrella Excess Third Party Liability	The Excess Insurer's Limit of Liability is (Complete one) (a) \$ _____ in excess of a Retained Limit (b) Up to \$ _____ in excess of a Retained Limit and in excess of various underlying Insurer's Limits of Liability			

† each Accident

* Includes Coverage for Cornell Dubilier Electric Corp.
Complete below, by designating company by number in the box and entering policy number and expiration date in the sections corresponding to the type of insurance indicated above.

I. <input type="checkbox"/>	II. <input type="checkbox"/>	III. <input checked="" type="checkbox"/> RDX 893-64-73 exp 7/1/75	Policy Number Expiration Date
IV. <input type="checkbox"/>	V. <input type="checkbox"/>		Policy Number Expiration Date

1 Continental Casualty Company
 2 Transportation Insurance Company

6 National Fire Insurance Company of Hartford
 7 Transcontinental Insurance Company

8 American Casualty Company of Reading, Pa.
 9 Valley Forge Insurance Company

Certificate of Insurance

LUMBERMENS MUTUAL CASUALTY COMPANY AMERICAN MOTORISTS INSURANCE COMPANY AMERICAN MANUFACTURERS MUTUAL INSURANCE COMPANY FEDERAL KEMPER INSURANCE COMPANY SEQUOIA INSURANCE COMPANY

THIS CERTIFICATE IS ISSUED AT THE REQUEST OF:

- Monsanto Company
800 North Lindburgh
• St. Louis, Missouri 63166

DATE ISSUED: July 22nd, 1975**THE POLICIES INDICATED BELOW BY POLICY NUMBER, POLICY PERIOD AND LIMITS OF LIABILITY HAVE BEEN ISSUED TO:**

INSURED'S NAME AND ADDRESS	Federal Pacific Electric Company, Cornell Dubilier Electric Federal Pioneer Limited c/o U.V. Industries, Inc. 437 Madison Avenue, New York, NY 10022		
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POLICY FORM	POLICY NUMBER	POLICY PERIOD (MO.-DAY-YEAR)	COVERAGES AND LIMITS OF LIABILITY
Workmen's Compensation and Employers' Liability		From _____ To _____	Workmen's Compensation—Workmen's Compensation Law of Employers' Liability—\$
Combination Automobile—General Liability	5ZM 578 702	From 4/1/75 To Until Canc.	For such Coverage Parts as are indicated below by "x" and for the Limits of Liability stated opposite thereto.

COVERAGE AFFORDED	BODILY INJURY LIABILITY			PROPERTY DAMAGE LIABILITY	
	each person	each occurrence	aggregate	each occurrence	aggregate
<input type="checkbox"/> — Comprehensive Automobile Liability Insurance	\$ _____	\$ _____		\$ _____	
<input type="checkbox"/> — Garage Insurance <input type="checkbox"/> — Hazard 1 <input type="checkbox"/> — Hazard 2	\$ _____	\$ _____		\$ _____	
<input type="checkbox"/> — Garagekeepers' Legal Liability				\$ _____	
<input checked="" type="checkbox"/> — Comprehensive General Liability Insurance*		\$ * *	\$ 500,000	\$ * *	\$ 500,000
<input type="checkbox"/> — Owners', Landlords' and Tenants' Liability Insurance		\$ _____		\$ _____	
<input type="checkbox"/> — Manufacturers' and Contractors' Liability Insurance		\$ _____		\$ _____	
<input type="checkbox"/> — Completed Operations and Products Liability Insurance		\$ _____	\$ _____	\$ _____	
<input type="checkbox"/> — Contractual Liability Insurance (Designated Contracts Only)		\$ _____		\$ _____	
<input type="checkbox"/> — Independent Contractors Liability Insurance		\$ _____		\$ _____	
<input checked="" type="checkbox"/> — Other Coverage Parts: Employee Benefit Liability	\$ 250,000	Each Claim \$ 500,000	Aggregate	\$ _____	

DESCRIPTION OF OPERATIONS AND LOCATION TO WHICH CERTIFICATE APPLIES All operations of the Named Insured, including blanket contractual and pollution and contamination as afforded by the Policy

SPECIAL PROVISIONS

**Bodily Injury and Property Damage \$500,000 Combined Single Limit

In the event of any cancellation or material change in said policy the company will notify the party to whom this certificate is addressed ten (10) days prior to such change or cancellation.

This certificate of insurance neither affirmatively nor negatively amends, extends or alters the coverage afforded by the above numbered policy.

*Comprehensive General Liability Insurance applies to the following hazards: Owners', Landlords' and Tenants' and Manufacturers' and Contractors; Independent Contractors; and Products, Completed Operations, except as noted above.

Issued at New York, New York



AUTHORIZED REPRESENTATIVE

0526340

CERTIFICATE OF INSURANCE

LEXINGTON INSURANCE COMPANY

25 New Chardon Street · Boston, Massachusetts 02114

A CAPITAL STOCK COMPANY

This is to certify that the insurance policy specified below has been issued to the insured named herein and that, subject to their provisions, exclusions and conditions, such policies afford the coverages indicated insofar as such coverages apply to the occupation or business of the Named Insured as stated:

Federal Pacific Electric Co., Cornell Dubilier Electric Co.

INSURED: Federal Pioneer Ltd.

ADDRESS: c/o UV Industries, Inc., 437 Madison Ave., N.Y., N.Y. 10027

BUSINESS: Electrical Equipment Manufacturer

COVERAGE: Umbrella Liability

Policy Number	Effective Date	Expiration Date	Limit of Liability
500-28-16	4/23/75	4/1/76	\$1,000,000 Excess of Primary

EXCESS OF

Coverage	Underlying Limits
A. Bodily Injury Automobile	\$ _____ Each Person \$ _____ Each Accident or Occurrence
B. Bodily Injury Except Automobile	\$ _____ \$ 500,000. * \$ _____ Each Person Each Accident or Occurrence Aggregate Products
C. Property Damage Automobile	\$ _____ Each Accident or Occurrence
D. Property Damage Except Automobile	\$ _____ \$ 500,000. * \$ _____ \$ _____ \$ _____ Each Accident or Occurrence Aggregate Operations Aggregate Protective Aggregate Products Aggregate Contractual
E. Combined Single Limit Bodily Injury and/or Property Damage	\$ _____ Each Accident or Occurrence
F. Employers Liability, \$ _____ Coverage "B"	

*BI/PD
\$500,000 combined
single limit.

Coverage includes Blanket Contractual and Sudden and Accidental Pollution.

OR

EXCESS OF

\$ 10,000 ultimate net loss in respect of each occurrence not covered by underlying but applicable to umbrella liability only.

This Certificate of Insurance is issued as a matter of information only to:

NAME: Monsanto Company

ADDRESS: 800 North Lindbergh Blvd.

St. Louis, Missouri 63166

Dated at
this 29 Day of July 1975

Authorized Signature

CERTIFICATE OF INSURANCE

LEXINGTON INSURANCE COMPANY

25 New Chardon Street • Boston, Massachusetts 02114

A CAPITAL STOCK COMPANY

This is to certify that the insurance policy specified below has been issued to the insured named herein and that, subject to their provisions, exclusions and conditions, such policies afford the coverages indicated insofar as such coverages apply to the occupation or business of the Named Insured as stated:

Federal Pacific Electric Co., Cornell Dubilier Electric Co.
INSURED: Federal Pioneer Ltd.

ADDRESS: c/o UV Industries, Inc., 437 Madison Ave., N.Y., N.Y. 10027

BUSINESS: Electrical Equipment Manufacturer

COVERAGE: Umbrella Liability

Policy Number	Effective Date	Expiration Date	Limit of Liability
GC550-46-02	7/1/75	4/1/76	*See Below

EXCESS OF

Coverage	Underlying Limits
A. Bodily Injury Automobile	\$ _____ Each Person \$ _____ Each Accident or Occurrence
B. Bodily Injury Except Automobile	\$ _____ Each Person \$ _____ Each Accident or Occurrence \$ _____ Aggregate Products
C. Property Damage Automobile	\$ _____ Each Accident or Occurrence
D. Property Damage Except Automobile	\$ _____ Each Accident or Occurrence \$ _____ Aggregate Operations \$ _____ Aggregate Protective \$ _____ Aggregate Products \$ _____ Aggregate Contractual
E. Combined Single Limit Bodily Injury and/or Property Damage	\$ _____ Each Accident or Occurrence
F. Employers Liability, \$ _____ Coverage "B"	

*Limit of Liability
\$5,000,000 Excess of
\$4,000,000 Excess of
\$1,000,000 Excess of
Primary

Coverage includes Blanket Contractual and Sudden and Accidental Pollution
OR
EXCESS OF

\$ _____ ultimate net loss in respect of each occurrence not covered by underlying but applicable to umbrella liability only.

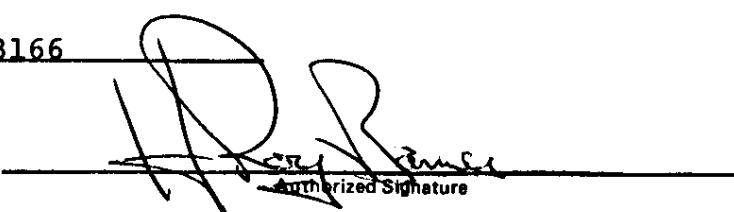
This Certificate of Insurance is issued as a matter of information only to:

NAME: Mosanto Company

ADDRESS: 800 North Lindbergh Blvd.

S. Louis, Missouri 63166

Dated at
this 29 Day of July 19 75


Authorized Signature

Certificate of Insurance

 LUMBERMEN'S MUTUAL CASUALTY COMPANY AMERICAN MOTORISTS INSURANCE COMPANY AMERICAN MANUFACTURERS MUTUAL INSURANCE COMPANY FEDERAL MUTUAL INSURANCE COMPANY SEQUOIA INSURANCE COMPANY

THIS CERTIFICATE IS ISSUED AT THE REQUEST OF:

Monsanto Industrial Chemicals
 Company
 800 North Lindbergh Boulevard
 St. Louis, Missouri 63166

DATE ISSUED: April 1, 1976

THE POLICIES INDICATED BELOW BY POLICY NUMBER, POLICY PERIOD AND LIMITS OF LIABILITY HAVE BEEN ISSUED TO:

INSURED'S NAME AND ADDRESS		Federal Pacific Electric Company & Cornell-Dubilier Electrical c/o U. V. Industries, Inc. Corporation 437 Madison Avenue New York, N. Y. 10023		
POLICY FORM	POLICY NUMBER	POLICY PERIOD (MO.-DAY-YEAR)	COVERAGES AND LIMITS OF LIABILITY	
Workmen's Compensation and Employers' Liability	5CM 578 701	From 4/1/75 To until canc.	Workmen's Compensation—Workmen's Compensation Law of Employers' Liability—\$ 100,000	Statutory
Combination Automobile—General Liability	5ZM 578 702	From 4/1/75 To until canc.	For such Coverage Parts as are indicated below by "x" and for the Limits of Liability stated opposite thereto.	
COVERAGE AFFORDED		BODILY INJURY LIABILITY		PROPERTY DAMAGE LIABILITY
<input checked="" type="checkbox"/> Comprehensive Automobile Liability Insurance <input type="checkbox"/> Garage Insurance <input type="checkbox"/> Hazard 1 <input type="checkbox"/> Hazard 2 <input type="checkbox"/> Garagekeepers' Legal Liability <input checked="" type="checkbox"/> Comprehensive General Liability Insurance* - Owners', Landlords' and Tenants' Liability Insurance <input type="checkbox"/> Manufacturers' and Contractors' Liability Insurance <input type="checkbox"/> Completed Operations and Products Liability Insurance <input checked="" type="checkbox"/> Contractual Liability Insurance (Designated Contracts Only) <input type="checkbox"/> Independent Contractors Liability Insurance <input type="checkbox"/> Other Coverage not Employee Benefit Liability		each person	each occurrence	aggregate
		\$ _____	\$ 500,000	\$ 250,000
		\$ _____	\$ _____	\$ _____
		\$ 500,000	\$ 500,000	\$ 250,000 \$ 500,000
		\$ _____	\$ _____	\$ _____
		\$ _____	\$ _____	\$ _____
		\$ _____	\$ _____	\$ _____
		\$ _____	\$ _____	\$ 500,000
		\$ _____	\$ _____	\$ _____
		\$ 250,000 - 500,000	each claim aggregate	\$ _____
DESCRIPTION OF OPERATIONS AND LOCATION TO WHICH CERTIFICATE APPLIES				
All operations undertaken by the Insured and all automobiles owned or operated by the Insured.				
SPECIAL PROVISIONS				
In the event of any cancellation or material change in said policy the company will notify the party to whom this certificate is addressed ten (10) days prior to such change or cancellation. Blanket Contractual Liability Coverage and Pollution Coverage in case of sudden and accidental spillage are included.				

This certificate of insurance neither affirmatively nor negatively amends, extends or alters the coverage afforded by the above numbered policy.

*Comprehensive General Liability Insurance applies to the following hazards: Owners', Landlords' and Tenants' and Manufacturers' and Contractors; Independent Contractors; and Products, Completed Operations, except as noted above.

XXXXXXXXXXXX and Contractual.

Issued at New York, New York

AUTHORIZED REPRESENTATIVE

CERTIFICATE OF INSURANCE
LEXINGTON INSURANCE COMPANY

25 New Chardon Street • Boston, Massachusetts 02114

A CAPITAL STOCK COMPANY

This is to certify that the insurance policy specified below has been issued to the insured named herein and that, subject to their provisions, exclusions and conditions, such policies afford the coverages indicated insofar as such coverages apply to the occupation or business of the Named Insured as stated:

INSURED: Federal Pacific Electric Company & Cornell Dubilier Electric CorpADDRESS: c/o U.V. Industries Inc., 437 Madison Ave., N.Y., N.Y. 10022

BUSINESS: _____

COVERAGE: Umbrella Liability

Policy Number	Effective Date	Expiration Date	Limit of Liability
500-2844	4/1/76	4/1/77	\$5,000,000.

EXCESS OF \$5,000,000.

Coverage	Underlying Limits
A. Bodily Injury Automobile	\$ _____ Each Person \$ _____ Each Accident or Occurrence
B. Bodily Injury Except Automobile	\$ _____ Each Person \$ _____ Each Accident or Occurrence \$ _____ Aggregate Products
C. Property Damage Automobile	\$ _____ Each Accident or Occurrence
D. Property Damage Except Automobile	\$ _____ Each Accident or Occurrence \$ _____ Aggregate Operations \$ _____ Aggregate Protective \$ _____ Aggregate Products \$ _____ Aggregate Contractual
E. Combined Single Limit Bodily Injury and/or Property Damage	\$ _____ Each Accident or Occurrence
F. Employers Liability, Coverage "B"	\$ _____

See Over

OR

EXCESS OF

\$ _____ ultimate net loss in respect of each occurrence not covered by underlying but applicable to umbrella liability only.

This Certificate of Insurance is issued as a matter of information only to:

NAME: Monsanto Industrial Chemicals Co.ADDRESS: 800 N. Lindberg Boulevard

0527010

St. Louis, Missouri 63166Dated at
this 5 Day of May 19 76

Authorized signature

H. Roy Barnes

Excess Liability following the terms, conditions, definitions and exclusions of the Lexington Insurance Company's policy. Blanket Contractual Liability coverage and Pollution coverage in case of sudden and accidental spillage are included.

0527011

CERTIFICATE OF INSURANCE
LEXINGTON INSURANCE COMPANY

25 New Chardon Street • Boston, Massachusetts 02114

A CAPITAL STOCK COMPANY

This is to certify that the insurance policy specified below has been issued to the insured named herein and that, subject to their provisions, exclusions and conditions, such policies afford the coverages indicated insofar as such coverages apply to the occupation or business of the Named Insured as stated:

INSURED: Federal Pacific Electric Company & Cornell Dubilier Electric Corp.

ADDRESS: c/o U. V. Industries, Inc., 437 Madison Ave., New York 10022

BUSINESS: _____

COVERAGE: Umbrella Liability

Policy Number	Effective Date	Expiration Date	Limit of Liability
500-2844	4/1/76	4/1/77	\$1,000,000

EXCESS OF PRIMARY

Coverage	Underlying Limits
A. Bodily Injury Automobile \$	Each Person
	Each Accident or Occurrence
B. Bodily Injury Except Automobile \$	Each Person
	Each Accident or Occurrence
	Aggregate Products
C. Property Damage Automobile \$	Each Accident or Occurrence
D. Property Damage Except Automobile \$	Each Accident or Occurrence
	Aggregate Operations
	Aggregate Protective
	Aggregate Products
	Aggregate Contractual
E. Combined Single Limit Bodily Injury and/or Property Damage \$	Each Accident or Occurrence
F. Employers Liability, \$ Coverage "B"	

See Over

OR
EXCESS OF

\$ 10,000 ultimate net loss in respect of each occurrence not covered by underlying but applicable to umbrella liability only.

This Certificate of Insurance is issued as a matter of information only to:

NAME: Monsanto Industrial Chemicals Co.

ADDRESS: 800 N. Lindbergh Blvd.

St. Louis, Mo. 63166

Dated at New York
this 30th Day of April 1976

H. Roy Barnes
Authorized Signature

Form 8401

H. Roy Barnes

0526325

\$4,000,000 excess of \$1,000,000 each Occurrence or in the Aggregate where applicable. Excess Liability following the terms, conditions, definitions and exclusions of the Lexington Insurance Company's policy. Blanket Contractual Liability coverage and Pollution coverage in case of sudden and accidental spillage are included.

C-101 1/73

5334

HIGHLANDS INSURANCE COMPANY**HIGHLANDS UNDERWRITERS INSURANCE COMPANY**600 JEFFERSON STREET
HOUSTON, TEXAS 77002**CERTIFICATE OF INSURANCE****NAME AND ADDRESS OF CERTIFICATE HOLDER**

Monsanto Industrial Chemicals Co.
 800 North Lindbergh Boulevard
 St. Louis, Missouri

NAME AND ADDRESS OF INSURED

Federal Pioneer Limited

Cornell Dubilier Electronics

This is to certify that the policies of insurance as described below have been issued to the insured for whom this certificate is executed and are in force at this time. In the event of cancellation or material change in a policy affecting the certificate holder, 10 days prior written notice will be given the certificate holder.

COVERAGE	POLICY NUMBER	DATE		LIMITS OF LIABILITY
		EFFECTIVE	EXPIRATION	
Workmen's Compensation and Employers Liability in the states named below Employers Liability Coverage B				Statutory ,000
Bodily Injury Liability - Except Automobile Comprehensive: Yes No				,000 each occurrence ,000 aggregate
Property damage liability - except automobile				,000 each occurrence ,000 aggregate
Automobile Bodily Injury Liability Comprehensive: Yes No				,000 each person ,000 each occurrence
Automobile Property Damage Liability				,000 each occurrence
Excess Umbrella Liability	SR 20287	4/1/77	4/1/78	\$2,000,000 PART OF \$5,000,000 EXCESS OR \$5,000,000 EXCESS OF PRIMARY INSURANCE
Other Insurance				

Absence of entry in any space means that insurance is not afforded to the coverage opposite thereto.

This certificate of insurance neither affirmatively nor negatively amends, extends or alters the coverage afforded by Policies shown above.

Location of Operations

Description of Operations:

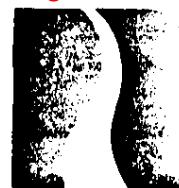
Manufacturing of electrical equipment

0526399

 Highlands Insurance Company
 Highlands Underwriters Insurance Company
Date 5/19/77

Authorized Representative

**Northbrook
Insurance Company
Northbrook, Illinois**



Certificate of Insurance – Casualty

STOCK COMPANY

Insured's Name and Mailing Address: (No., Street, Town, County, State, Zip Code)

Federal Pacific Electric Co.
150 Avenue L
Newark, New Jersey 07101

63-002-939
Policy Number

Federal Pioneer Limited
19 Waterman Avenue
Toronto, Ontario M4BLY2

Cornell-Dubilier Electronics

This is to certify, that insurance has been effected as follows:

Coverage for Which Insurance is Afforded	Limits of Liability	Term
Umbrella Liability	\$5,000,000. any one occurrence and in the aggregate (where applicable) excess of Primary and/or a \$25,000. Self Insured Retention	April 1, 1977 To April 1, 1978

Certificate Holder:

Monsanto Industrial Chemicals Co.
800 N. Lindbergh Blvd.
St. Louis, Missouri
Attn: D. Wood, Market Manager

PRODUCER Avreco, Inc. (Chicago, Illinois)

This document is furnished you as a matter of information only. The issuance of this document does not make the person or organization to whom it is issued an additional assured, nor does it modify in any manner the contract of insurance between the Assured and the Company. Any amendment, change or extension of such contract can only be effected by specific endorsement attached thereto. Should the above mentioned contract of insurance be cancelled, assigned or changed during the above named policy period in such manner as to effect this document, we, the undersigned, will endeavour to give 10 days written notice to the holder of this document, but failure to give such notice shall impose no obligation of any kind upon the undersigned or upon this Company.

Date May 31, 1977

By _____

P. C. Haade
Authorized Representative

0526984

CERTIFICATE OF INSURANCE

5336

THIS CERTIFICATE OF INSURANCE NEITHER AFFIRMATIVELY NOR NEGATIVELY AMENDS, EXTENDS OR
ALTERS THE COVERAGE AFFORDED BY ANY POLICY DESCRIBED HEREIN.

UNITED STATES FIRE INSURANCE COMPANY
 THE NORTH RIVER INSURANCE COMPANY
 WESTCHESTER FIRE INSURANCE COMPANY
 INTERNATIONAL INSURANCE COMPANY

**CRUM & FORSTER INSURANCE COMPANIES
THE POLICY MAKERS**THIS IS TO CERTIFY TO Monsanto Industrial Chemicals Co., Att: Mr. D. Wood
(NAME OF CERTIFICATE-HOLDER)OF 800 N. Lindbergh Blvd., St. Louis, Missouri
(ADDRESS OF CERTIFICATE-HOLDER)

THAT ON THE DATE BELOW THE FOLLOWING DESCRIBED INSURANCE POLICIES, ISSUED BY THIS COMPANY, ARE IN FULL FORCE AND EFFECT:

INSURED'S NAME:	Federal Pioneer Limited	Cornell - Dubilier Electronics
ADDRESS:	19 Waterman Avenue	Federal Pacific Electric Co.
CITY & STATE:	Toronto, Ontario, Canada M4B1Y2	

THE POLICIES INDICATED HEREIN APPLY WITH RESPECT TO THE HAZARDS AND FOR THE COVERAGES AND LIMITS OF LIABILITY INDICATED BY SPECIFIC ENTRY HEREIN, SUBJECT TO ALL THE TERMS OF SUCH POLICIES.

HAZARDS	POLICY NUMBER	EFFECTIVE DATE	EXPIRATION DATE	COVERAGES AND LIMITS OF LIABILITY		
				BODILY INJURY LIABILITY		PROPERTY DAMAGE LIABILITY
				each occurrence	each person	each occurrence
PREMISES - OPERATIONS				\$,000	\$,000	\$,000
ELECTRATORS				\$,000	\$,000	XXXX
INDEPENDENT CONTRACTORS				\$,000	\$,000	\$,000
PRODUCTS - COMPLETED OPERATIONS				\$,000	\$,000	\$,000
CONTRACTUAL AS DESCRIBED BELOW				AGGREGATE: \$,000	XXXX	XXXX
				\$,000	\$,000	\$,000
				each person	each occurrence	
AUTOMOBILE LIABILITY OWNED AUTOMOBILES				\$,000	\$,000	\$,000
Hired AUTOMOBILES				\$,000	\$,000	\$,000
NON OWNED AUTOMOBILES				\$,000	\$,000	\$,000
WORKMEN'S COMPENSATION AND EMPLOYERS' LIABILITY				COMPENSATION-STATUTORY		
				EMPLOYERS' LIABILITY - \$,000		
UMBRELLA LIABILITY	JU0313	4/1/77	4/1/78	\$ 1 ,000,000 part of \$5,000,000 excess of \$5,000,000		

LOCATION AND DESCRIPTION OF OPERATIONS, AUTOMOBILES, CONTRACTS, CONTRACTUAL LIABILITY - (INDICATE TYPE OF AGREEMENT, PARTY AND DATE).

0526397

Should any of the above described policies be cancelled before the normal expiration date thereof, the Company will endeavor to give written notice to the above Named Certificate-holder, but failure to give such notice shall impose no obligation or liability of any kind upon the Company.

DATE: June 28, 1977

BY William F. Schwartz, Jr./Tom Schmitt
AUTHORIZED REPRESENTATIVE